Schedule E)	PAGE 1 OF 8 FOR SE OF FORM 24/48		
AME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMIT	FEC IDENTIFICATION NUMBER ▼		
Check if 24-hour report X 48-hour report New report Amends report filed on			
Full Name of Payee MCCARTHY HENNINGS WHALEN, INC.	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1850 M ST NW			
STE 235	Amount		
City State Zip Code	17500.00		
WASHINGTON DC 20036-583	Transaction ID : SE24-0.041920 Date of Disbursement or Obligation		
Purpose of Expenditure MEDIA  Category Type			
Name of Federal Candidate	Support Office Sought:  House District: 03		
STACI APPEL	Oppose President Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary X General 2014 Other (specify) ▶		
Full Name of Payee	Date of Public Distribution/Dissemination		
MCCARTHY HENNINGS WHALEN, INC.	09 01 2014		
Mailing Address 1850 M ST NW	Amount		
STE 235	Allount		
City State Zip Code WASHINGTON DC 20036-58	37 Transaction ID : SE24-0.041921 Date of Disbursement or Obligation		
Purpose of Expenditure MEDIA  Category Type	M M / D D / Y Y Y Y		
Name of Federal Candidate	Support Office Sought:  House District: 03		
STACI APPEL	Oppose President Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General  2014 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	23385.84		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	······································		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Keith A. Davis  [Electronically Filed] Signature	Date 09 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		

Schedule E)	PAGE 2 OF 8 FOR SE OF FORM 24/48			
AME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼			
	C C00075820			
heck if 24-hour report X 48-hour report New report Amends report filed on				
Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 815 SLATERS LANE	Amount			
City State Zip Code	138654.66			
ALEXANDRIA VA 22314	Transaction ID : SE24-0.041861 Date of Disbursement or Obligation			
Purpose of Expenditure MEDIA  Category/ Type	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Off	fice Sought: X House District: 03			
STACI APPEL Oppose	President Senate State: IA			
Calendar Year-To-Date Per Election for Office Sought  Dis 202	sbursement For: Primary ⊠ General  14 Other (specify) ▶			
Full Name of Payee IMGE	Date of Public Distribution/Dissemination			
	08 01 Y Y Y Y Y Y			
Mailing Address 603 KING ST	Amount			
City State Zip Code	2500.00			
ALEXANDRIA VA 22314	Transaction ID : SE24-0.041426 Date of Disbursement or Obligation			
Purpose of Expenditure MEDIA  Category/ Type	08 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Off	fice Sought:			
STACI APPEL Oppose	President Senate State: IA			
	sbursement For: Primary X General 114 Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	141154.66			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Keith A. Davis  [Electronically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			

**PAGE** OF (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 New report Check if 24-hour report X 48-hour report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination GS STRATEGY GROUP 09 01 2014 Mailing Address 350 N 9TH ST Amount SUITE 550 City State Zip Code 21180.00 BOISE ID 83702 Transaction ID: SE24-0.041870 Date of Disbursement or Obligation Purpose of Expenditure Category/ SURVEY RESEARCH 09 02 2014 Type Name of Federal Candidate X House 03 Office Sought: District: Support STACI APPEL IΑ Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 185720.50 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 02 2014 Mailing Address 815 SLATERS LANE Amount Zip Code City State 64965.45 **ALEXANDRIA** VA Transaction ID: SE24-0.041859 22314 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA 2014 80 28 Type Name of Federal Candidate 02 Support Office Sought: X House District: **RONALD BARBER** ΑZ Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 379083.19 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 86145.45 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 09 03 2014 Date Signature

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

**PAGE** OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 X 48-hour report 24-hour report X New report Amends report filed on Check if Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 09 2014 03 Mailing Address 815 SLATERS LANE Amount State Zip Code 111917.10 City Transaction ID: SE24-0.041925 VA 22314 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ **MEDIA** 80 29 2014 Type Name of Federal Candidate X House 02 Office Sought: District: Support **RONALD BARBER** ΑZ Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 379083.19 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination VICTORIA EUGENIA NEWTON 01 2014 Mailing Address 6825 WASHINGTON BLVD Amount **STE 104** City State Zip Code 1666.67 ARLINGTON VA Transaction ID: SE24-0.041923 22213 Date of Disbursement or Obligation Purpose of Expenditure Category/ SURVEY RESEARCH 2014 09 02 Type Name of Federal Candidate 12 Support Office Sought: X House District: JOHN BARROW GΑ Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 574536.68 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 113583.77 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 09 03 2014 Date Signature

Schedule E)	PAGE 5 OF 8 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼  C C00075820		
Check if 24-hour report X 48-hour report New report Amends report filed on			
Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address PO BOX 16504	Amount		
City State Zip Code ALEXANDRIA VA 22302	21837.00 Transaction ID : SE24-0.041924		
Purpose of Expenditure MEDIA  Category/ Type	Date of Disbursement or Obligation  09 02 2014		
Name of Federal Candidate Support	Office Sought:		
JOHN BARROW Oppose	President Senate State: GA		
Calcildal Ical Io Date	Disbursement For:  Primary  ☐ General  2014  Other (specify) ►		
Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC	Date of Public Distribution/Dissemination  M M O O O O O O O O O O O O O O O O O		
Mailing Address 815 SLATERS LANE	Amount		
City State Zip Code ALEXANDRIA VA 22314	135575.16 Transaction ID : SE24-0.041860		
Purpose of Expenditure MEDIA  Category/ Type	Date of Disbursement or Obligation  08 28 2014		
Name of Federal Candidate Support	Office Sought:		
JOHN BARROW Oppose	President Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought 574536.68	Disbursement For:  Primary		
(a) SUBTOTAL of Itemized Independent Expenditures	157412.16		
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>•</b>		
(c) TOTAL Independent Expenditures	<b>•</b>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Keith A. Davis  [Electronically Filed] Date	09 / 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		

Schedule E)	TOTILS	PAGE 6 OF 8 FOR SE OF FORM 24/48		
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼		
		C C00075820		
heck if 24-hour report X 48-hour report New report Amends report filed on				
Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PL	ACEMENT LLC	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 815 SLATERS LANE		Amount		
City State	Zip Code	44865.16		
ALEXANDRIA VA	22314	Transaction ID : SE24-0.041863  Date of Disbursement or Obligation		
Purpose of Expenditure MEDIA	Category/ Type	08 28 7 2014		
Name of Federal Candidate	Support	Office Sought: X House District: 02		
GWEN GRAHAM	X Oppose	President Senate State:FL		
Calendar Year-To-Date Per Election for Office Sought 33	77574.42	Disbursement For: Primary ☐ General  2014  Other (specify) ▶		
Full Name of Payee		Date of Public Distribution/Dissemination		
NATIONAL MEDIA RESEARCH PLANNING & PL	ACEMENT LLC	09 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 815 SLATERS LANE		Amount		
City State	Zip Code	376244.36		
ALEXANDRIA VA	22314	Transaction ID : SE24-0.041862  Date of Disbursement or Obligation		
Purpose of Expenditure MEDIA	Category/ Type	08 / D D / Y Y Y Y Y Y Y		
Name of Federal Candidate	Support	Office Sought:     House District: 01		
ANN KIRKPATRICK	X Oppose	President Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought	543701.36	Disbursement For:		
(a) SUBTOTAL of Itemized Independent Expenditures		421109.52		
(b) OUDTOTAL of Heiberies deleters and an Europeine				
(b) SUBTOTAL of Unitemized Independent Expenditures		•		
(c) TOTAL Independent Expenditures		<b>&gt;</b>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
	cally Filed] Date	09 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature				

Schedule E)	PAGE 7 OF 8 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼  C C00075820			
Check if 24-hour report X 48-hour report New report Amends report filed on				
Full Name of Payee VICTORIA EUGENIA NEWTON	Date of Public Distribution/Dissemination  09 01 2014			
Mailing Address 6825 WASHINGTON BLVD	Amount			
STE 104				
City State Zip Code ARLINGTON VA 22213	1666.67 Transaction ID : SE24-0.041927			
Purpose of Expenditure SURVEY RESEARCH Category/ Type	Date of Disbursement or Obligation  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support	ort Office Sought: X House District: 03			
NICK J RAHALL II				
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
FP1 STRATEGIES LLC	09 01 7 2014			
Mailing Address PO BOX 16504	Amount			
City State Zip Code	59713.33			
ALEXANDRIA VA 22302	Transaction ID : SE24-0.041922  Date of Disbursement or Obligation			
Purpose of Expenditure MEDIA  Category/ Type	09 / 02 / 2014			
Name of Federal Candidate Supp	ort Office Sought: X House District: 03			
NICK J RAHALL II				
Calendar Year-To-Date Per Election for Office Sought 349276.63	Disbursement For:  Primary  General			
(a) SUBTOTAL of Itemized Independent Expenditures	61380.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(b) SOBTOTAL OF GITTERING TRACEPORTAGINE EXPONENTIAL EXPONENTIAL OF GITTERING TRACEPORTAGINE EXPONENTIAL EXPONENTI				
(c) TOTAL Independent Expenditures	······································			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Keith A. Davis  [Electronically Filed] Signature	Date 09 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Orginaturo				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)  FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)  FEC IDENTIFICATION NUMBER ▼				
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE				
		C C00075820		
		M = M / D = D / Y = Y = Y		
Check if 24-hour report 48-hour report New report Amends report filed on				
Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date of Public Distribution/Dissemination		
Mailing Address 815 SLATERS LANE		09 02 2014		
615 SLATERS LAINE		Amount		
City State	Zip Code	246896.63		
ALEXANDRIA VA	22314	Transaction ID : SE24-0.041884  Date of Disbursement or Obligation		
Purpose of Expenditure	Category/	M M / D D / Y Y Y		
MEDIA	Type	08 28 2014		
Name of Federal Candidate	Support Offi	ce Sought: X House District: 03		
NICK J RAHALL II	∑ Oppose	President Senate State: WV		
Calendar Year-To-Date	Disl 49276.63 201	bursement For: Primary X General		
Per Election for Office Sought	49276.65	Other (specify)		
Full Name of Payee		Date of Public Distribution/Dissemination		
		M = M / D = D / Y = Y = Y		
Mailing Address				
		Amount		
City State	Zip Code			
		Date of Disbursement or Obligation		
Purpose of Expenditure	Category/	Mam / Dad / Yayayay		
	Type			
Name of Federal Candidate	Support Offi	ce Sought: House District:		
	Oppose	President Senate State:		
Calendar Year-To-Date	Dis	bursement For: Primary General		
Per Election for Office Sought		Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures		246896.63		
	·	7 7 7		
(b) SUBTOTAL of Unitemized Independent Expenditures	·····			
		4 4		
(c) TOTAL Independent Expenditures	·····	1251068.03		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert				
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political				
party committee) any political party committee or its agent.				
Keith A. Davis		I = M / D = D / Y = Y = Y		
Signature	cally Filed] Date	09 03 2014		